

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	KW	68904	9/22/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	SL	S27	10-24-00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 : ..... Restricted O ..... Objected

Claim	Date	Claim	Date	Claim	Date
Final	Original	Final	Original	Final	Original
1		2	7/22/00	3	7/22/00
3		5		5	
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100			N		

If more than 150 claims or 10 actions  
staple additional sheet here

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